CLAIMS ONLY
BEST AVAILABLE COPY

Application Number	Filing Date
10/605,436	
Applicant(s)	

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend			Indep	Depend	Indep	Depend	Indep	Depend
1	1		1				51							
2			X	X			52							
3				1			53							
4				1			54							
5				1			55							
6			1				56							
7				1			57							
8				1			58							
9				1			59							
10				1			60							
11				1			61							
12				1			62							
13				1			63							
14	1		1				64							
15			X	X			65							
16				1			66							
17				1			67							
18				1			68							
19				1			69							
20				1			70							
21				1			71							
22							72							
23				1			73							
24				1			74							
25	1		1				75							
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44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
Total Indep	3		4				Total Indep							
Total Depend	22		14				Total Depend							
Total Claims	25		25				Total Claims							